

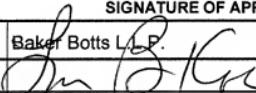
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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/789,308
Filing Date	02/26/2004
First Named Inventor	Jessell et al.
Art Unit	1647
Examiner Name	Daniel C. Gamett
Attorney Docket Number	070050.2891

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		Non-Patent Literature
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Baker Botts L.L.P.	
Signature		
Printed name	Lisa B. Kole	
Date	11/14/2007	Reg. No. 35,225

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

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FEE TRANSMITTAL for FY 2007

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT **(\$)** 705

Complete if Known

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METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

02-4377

Baker Botts L.L.P.

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

Extra Claim Fees

Total Claims	Extra Claims	Fee	Fee Paid
		25	\$0
Independent Claims		105	\$0
Multiple Dependent			\$0

SUBTOTAL **\$0**

Fee Description	Large Entity	Small Entity
Claims in excess of 20	50	25
Independent claims in excess of 3	210	105
Multiple dependent claim, if not paid	370	185

FEE CALCULATION (continued)

ADDITIONAL FEES

Surcharge - late oath or filing fee
 Non-English Specification
 Extension for reply within first month
 Extension for reply within second month
 Extension for reply within third month
 Extension for reply within fourth month
 Extension for reply within fifth month
 Notice of Appeal
 Filing a brief in support of an appeal
 Petition to revive - unavoidable
 Petition to revive - unintentional
 Utility Issue Fee
 Design Issue Fee
 Publication Fee
 Petitions to the Commissioner
 Request for Continued Examination (RCE)

\$525

Other fee -

SUBTOTAL **(\$)** 705

(Complete if applicable)

SUBMITTED BY	<i>Lisa B. Kole</i>		
Name (Print/Type)	Lisa B. Kole	Registration No. (Attorney/Agent)	35,225
Signature	<i>Lisa B. Kole</i>		
	Telephone	212-408-2500	
	Date	11/14/2007	

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